## REVIEW OF RESEARCH

# IMMIGRANT YOUTH MENTAL HEALTH, ACCULTURATION, AND ADAPTATION

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Immigrant youth make up an increasingly significant part of the national Catholic school population. This article discusses the challenges facing all immigrant youth, with special attention given to the Hispanic community.

#### OVERVIEW

#### PUBLIC HEALTH SIGNIFICANCE

National interest in children's mental health as a significant public health issue has heightened over the last 1. Vissue has heightened over the last decade. For example, several recent reports released by federal departments indicate the national significance of preventing and addressing the mental health needs of children in the United States (New Freedom Commission on Mental Health, 2003; United States Department of Health and Human Services [USDHHS], 1999, 2000). In particular, the surgeon general's seminal reports on mental health (USDHHS, 1999) and children's mental health (USDHHS, 2000) intensified the focus on adult and child mental health research, practice, and policy. Reports such as these documented that 1 in 10 children and adolescents suffers from mental illness severe enough to cause some level of functional impairment (Burns et al., 1995; Shaffer et al., 1996).

The need to promote recovery and resilience among youth is great, but among diverse segments of the youth population such as immigrant youth, the need is even greater. That sentiment was echoed in the report, Blueprint for Change: Research on Child and Adolescent Mental Health, which identified the need to examine how causal mechanisms may vary "across developmental or sociocultural contexts" (National Advisory Mental Health Council Workgroup, 2001, p. 6). Healthy People 2010: Understanding and Improving Health (USDHHS, 2000) is a major initiative composed by scientists both within and outside government designed to outline comprehensive disease prevention and health promotion objectives for the nation to achieve over the first decade of the 21st century. The Healthy People 2010 report

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suggested that one of those key objectives is to "improve mental health and ensure access to appropriate, quality mental health services" (p. 18-3). To attain that objective, it is necessary to consider the intersection of culture, race/ethnicity, and mental health and to examine "mental health trends among racial and ethnic groups" (p. 18-9).

#### MENTAL HEALTH AMONG IMMIGRANT YOUTH

One in five youth in the United States is a child of an immigrant (Reardon-Anderson, Capps, & Fix, 2002) and children of immigrants are the most rapidly growing segment of the U.S. population under age 18 (Van Hook & Fix, 2000). Consequently, there is a great need to better understand the psychosocial impact of immigration on children's mental health and adjustment. It is striking, however, that research on the mental health consequences of migration has focused on adult adaptation and less on how the migration process impacts children's lives (Guarnaccia & Lopez, 1998). James (1997) likewise noted that

limited literature exists concerning the psychosocial and mental health problems experienced by immigrants – legal and illegal – as a result of immigrating and subsequent adjustments. Much less is known about immigrant children, although they have established a visible presence in the schools and streets of America. (p. 98)

Guarnaccia and Lopez (1998) noted the complex interplay of individual and social-ecological factors around immigrant youth adaptation:

It is the dynamic interaction of the circumstances surrounding the migration, the characteristics of the migrant family, and the characteristics of the host community and its service system that produce or prevent the development of the psychological distress commonly associated with migration. (p. 539)

Factors that either lead to or preceded the migration – such as witnessing violence, fear, preparing for migration, and abrupt separation from primary social supports – produce consequences that can either be short-term or long lasting. During the migration itself, legal status (i.e., legal, illegal, undocumented) and eventful versus uneventful admissions into the country (e.g., border crossings) are important. Moreover, loss of loved ones and beloved objects may be felt at that time in an especially poignant way (Laosa, 1990; Suarez-Orozco & Suarez-Orozco, 1995, 2001; Suarez-Orozco & Todorova, 2003).

Once in the host country, the psychological trauma of uprooting and

adapting to a new culture often becomes manifest as acculturative stress. Acculturation stress, or stress that directly results from the acculturative process, can appear as feelings of alienation, depression and anxiety, identity problems, and psychosomatic symptoms (Berry & Kim, 1988; Hovey & King, 1996; Williams & Berry, 1991). Research has documented the significant psychological distress caused by the migration experience (Kao, 1999), including heightened alienation among school peers (Padilla & Durán, 1995) and lowered self-esteem and self-efficacy (Padilla & Durán, 1995; Portes & Rumbaut, 1996). Several studies have documented high rates of violence exposure and posttraumatic stress syndrome among immigrant and refugee youth (Arroyo & Eth, 1996; Guarnaccia & Lopez, 1998; Jaycox et al., 2002).

Researchers have noted that when disorders appear among immigrant children, they tend to manifest as behavior disorders and as identity disorders in adolescence (Aronowitz, 1984; García Coll & Magnuson, 1997). As immigration exerts a "destabilizing effect on the family," family structures, roles, and the balance of power between parents and youth may shift (Suarez-Orozco & Suarez-Orozco, 2001, p. 75). Families with adolescents face even more acute challenges:

The turbulent period of adolescence can be especially difficult for Latino parents, particularly for those who have recently arrived, because of the language and institutional barriers that often make parents dependent on their children to intervene on their behalf. This role reversal, placing children in positions of power and in the role of interpreters of the American world, can have a disorganizing impact on Latino families. (National Center for Mental Health Promotion and Youth Violence Prevention, 2004, p. 3)

In summary, the conflicts and adjustments of immigration place children at increased risk for psychosocial problems.

# SNAPSHOT OF ACCULTURATION, MENTAL HEALTH, AND ADAPTATION AMONG LATINO YOUTH

Steinberg, Brown, and Dornbusch (1996) concluded that for immigrant youth, "becoming Americanized is detrimental to youngsters' achievement, and terrible for their overall mental health" (p. 98). De Leon Siantz cites earlier investigations (Baral, 1979; Borjas & Tienda, 1985) and notes that "the prevalence of mental health problems among Hispanic children appears to be negatively related to their length of stay in the United States" (1997, p. 151). The report, *Mental Health: Culture, Race, and Ethnicity* (USDHHS, 2001), summarized mental health among Latino youth, noting that "an examination of studies of mental health problems reveals a generally consistent pattern:

Latino youth experience a significant number of mental health problems, and in most cases, more problems than whites" (p. 135). The report cites empirical work documenting more anxiety-related problem behaviors among Latino than White students (Glover, Pumariega, Holzer, Wise, & Rodriguez, 1999), and that Latino middle schoolers from a Southwestern city reported more delinquency-type problem behaviors than White students (Vazsonyi & Flannery, 1997). "Studies of depressive symptoms and disorders also revealed more distress among Hispanic children and adolescents, particularly among Mexican-origin youth" (USDHHS, 2001, p. 135). Based on several investigations (Joiner, Perez, Wagner, Berenson, & Marquina, 2001; Roberts & Chen, 1995; Roberts & Sobhan, 1992), Hill, Bush, and Roosa (2003) described a consensus in the field that "children of Mexican descent have higher levels of depression" compared with Euro-American children (p. 189). Noting the need to move beyond epidemiologic studies, Varela et al. (2004) recently commented that "the paucity of research regarding anxiety in Hispanic children, and their mental health in general, is alarming considering the ethnic composition of the U.S. population" (p. 237).

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